

1250-142

PART B—ISSUE FEE TRANSMITTAL

MAILING INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE. Blocks 2 through 6 should be completed where appropriate. All other correspondence including the Issue Fee Receipt, the Patent, advance orders and notification of maintenance fees will be mailed to addressee entered in Block 1 unless you direct otherwise, by: (a) specifying a new correspondence address in Block 3 below; or (b) providing the PTO with a separate "TELEADDRESS" for maintenance fee notifications with the payment of Issue Fee or thereafter. See reverse for Certificate of Mailing.

CORRESPONDENCE ADDRESS

TRADEMARKS

16
1996
S

Intel. & Bell Labs. and their respective registered trademarks and service marks are the property of the inventors and are used with their consent.

12M2/0207

MILLEN, WHITE ZELAND AND BRANIGAN
ARLINGTON COURTHOUSE PLAZA, SUITE 1400
2200 CLARENDON BOULEVARD
ARLINGTON VA 22201

2. INVENTOR(S) ADDRESS CHANGE (Complete only if there is a change)

INVENTOR'S NAME

Street Address
Box 1250-142

City, State and ZIP Code

CO-INVENTOR'S NAME

Street Address

City, State and ZIP Code

 Check if additional changes are on reverse side

SERIES CODE/SERIAL NO.	FILING DATE	TOTAL CLAIMS	EXAMINER AND GROUP ART UNIT	DATE MAILED
08/314,734	09/29/94	012	BERNHARDT, E	12025 02/07/96
First Named Applicant	BOTTCHER,		HENNING	

TITLE OF INVENTION

(s1sC)

ATTY'S DOCKET NO.	CLASS-SUBCLASS	BATCH NO.	APPLN. TYPE	SMALL ENTITY	FEES DUE	DATE DUE
1 MERCK1617	514-2540000		Nonprovisional Application	No	\$1,250.00	05/07/96

3. Correspondence address change (Complete only if there is a change)

4. For printing on the patent front page, list the names of not more than 3 registered patent attorneys or agents OR, alternatively, the name of a firm having as a member a registered attorney or agent. If no name is listed, no name will be printed.

1. Millen, White, Zelane, & Branigan, P.C.

2. _____

3. _____

5. ASSIGNMENT DATA TO BE PRINTED ON THE PATENT (print clearly)

- (1) NAME OF ASSIGNEE: MERCK PATENT GESELLSCHAFT MIT BESCHRANKTER HAFTUNG
 (2) ADDRESS: (CITY & STATE OR COUNTRY)
Darmstadt, Germany

6a. The following fees are enclosed:

 Issue Fee Advance Order - # of Copies _____

6b. The following fees should be charged to my account:

 DEPOSIT ACCOUNT NUMBER _____ Issue Fee Advance Order - # of Copies _____ Any Deficiencies in Enclosed Fees _____

The COMMISSIONER OF PATENTS AND TRADEMARKS is requested to apply the Issue Fee to the application identified above.

(Authorized Signature)

(Date)

4/16/96

NOTE: The Issue Fee will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the Patent and Trademark Office.

Brion P. Heaney (32,542)

TRANSMIT THIS FORM WITH FEE-CERTIFICATE OF MAILING ON REVERSE